

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
[www.USPTO.gov](http://www.USPTO.gov)



**CONFIRMATION NO. 1175**

<b>SERIAL NUMBER</b> 09/731,773	<b>FILING DATE</b> 12/08/2000  <b>RULE</b>	<b>CLASS</b> 702	<b>GROUP ART UNIT</b> 2857	<b>ATTORNEY DOCKET NO.</b> MA-456-US
<b>APPLICANTS</b> Hidetoshi Kondo, Yamanashi, JAPAN;				
<b>** CONTINUING DATA *****</b> <div style="display: flex; justify-content: space-between; align-items: center;"> <span>No</span> <span>JWC</span> </div>				
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 349809/1999 12/09/1999 <div style="display: flex; justify-content: space-between; align-items: center; margin-top: 10px;"> <span>Yes</span> <span>JWC</span> </div>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/17/2001</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <input type="checkbox"/> Allowance Verified and <u>McGinn &amp; Gibb</u> JWC Acknowledged <u>Examiner's Signature</u> Initials	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 14	<b>TOTAL CLAIMS</b> 16	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> McGinn & Gibb, PLLC Suite 200 8321 Old Courthouse Road Vienna, VA 22182-3817				
<b>TITLE</b> Data access method in the network system and the network system				
<b>FILING FEE RECEIVED</b> 950	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> All Fees         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.16 Fees ( Filing )         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.18 Fees ( Issue )         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> Other _____         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> Credit         </div>		